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<b>Attention:</b>	Group Art Unit: 1745	<b>From:</b>	Travis Dodd
<b>Fax:</b>	571-273-8300	<b>Fax:</b>	818-833-2065
<b>Phone:</b>		<b>Phone:</b>	818-833-2014
<b>Company:</b>	U.S. Patent and Trademark Office	<b>Company:</b>	Quallion LLC
<b>Pages:</b>			Total of (13) Pages
<b>Re:</b>	Application Serial No.: 10/810,019 Title: POLYSILOXANE FOR USE IN ELECTROCHEMICAL CELLS Filed: March 25, 2004 Examiner: Jonathan Crepeau Group Art Unit: 1745 Attorney Docket No.: Q198-US1	<b>Date:</b>	April 26, 2007

Urgent  For Review  Please Comment  Please Reply  Please Recycle

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Amendment Transmittal Letter (2 page)  
Fee Transmittal (in duplicate) (2 pages)  
Amendment (8 pages)

Lisa K. Robbins  
(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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PAGE 1/13 \* RCVD AT 4/26/2007 4:27:05 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-3/3 \* DNIS:2738300 \* CSID:8188332065 \* DURATION (mm:ss):02:52

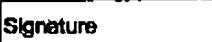
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/810,019
		Filing Date March 25, 2004
		First Named Inventor WEST, Robert C. et al.
		Group Art Unit 1745
		Examiner Name Jonathan Crepeau
Total Number of Pages in This Submission		Attorney Docket Number Q198-US1

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized  <input checked="" type="checkbox"/> Amendment  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application)  Drawing(s)  Licensing-related Papers  Petition to Convert to a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s) _____	After Allowance Communication to Group  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below):  <input type="text"/>	
	Remarks		
	31815 (Insert Customer No. or Attach bar code label here)		
	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0821. A duplicate copy of this sheet is enclosed.		
	Respectfully submitted,		
	Dated: 4/26/2007	By: 	
	Phone: (818) 833-2003 Fax: (818) 833-2055	Travis Dodd Attorneys for Applicant(s) P.O. Box 923127 Sylmar, CA 91382-3127	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail		
In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:		
Typed or printed name	TRAVIS DODD	
Signature		Date

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		<b>Application Number</b> 10/810,019 <b>Filing Date</b> March 25, 2004 <b>First Named Inventor</b> WEST, Robert C. et al. <b>Group Art Unit</b> 1745 <b>Examiner Name</b> Jonathan Crepeau <b>Total Number of Pages in This Submission</b> <input type="text"/> <b>Attorney Docket Number</b> Q198-US1
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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Authorized  <input checked="" type="checkbox"/> Amendment  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
	Remarks	
	<b>Customer Number or Bar Code Label</b> 31815 <small>(Insert Customer No. or Attach bar code label here.)</small>	
	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.	
	Respectfully submitted, 	
	Dated: <u>4/26/2007</u> By: <u>Travis Dodd</u> <small>Attorneys for Applicant(s) P.O. Box 923127 Sylmar, CA 91392-3127</small>	
	<b>CERTIFICATE OF MAILING</b>	
	I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____	
	Typed or printed name <u>TRAVIS DODD</u>	
	Signature 	Date <u> </u>

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**FEE TRANSMITTAL**

Attorney Docket No.	Q198-US1
First Named Inventor:	West, Robert C. et al.
Application Number	10/810,019
Filing Date:	March 25, 2004
Examiner Name:	1745
Group/Art Unit:	Jonathan Crepeau

<b>TOTAL AMOUNT OF PAYMENT:</b>	\$ .00
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:  Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order Other - Credit Card

**2. UTILITY Basic Filing Fee & Claims**

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$300.00	\$150.00	\$0.00
Total Claims	27 - 54 =	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	1 - 4 =	0	X \$200.00	X \$100.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$360.00	\$180.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 350.00	\$ 175.00	\$0.00
Reissue filing fee	\$ 790.00	\$ 395.00	\$0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$0.00
Total of above Calculations =			\$0.00

**3. ADDITIONAL FEES**

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/26/2007

**FEE TRANSMITTAL**

<b>Attorney Docket No.</b>	Q198-US1
<b>First Named Inventor:</b>	West, Robert C. et al.
<b>Application Number</b>	10/810,019
<b>Filing Date:</b>	March 25, 2004
<b>Examiner Name:</b>	1745
<b>Group/Art Unit:</b>	Jonathan Crepeau

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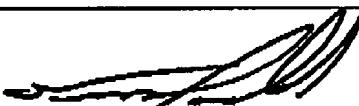
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Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/26/2007

Application No: 10/810,019 Docket No.: Q198-US1

Page 1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED  
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APR 26 2007In Re Application of:  
WEST, Robert C. et al.

Examiner: CREPEAU, Jonathan

Serial No.: 10/810,019

Art Unit: 1745

Filed: March 25, 2004

Title: POLYSILOXANE FOR USE IN  
ELECTROCHEMICAL CELLSMail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**AMENDMENT AND REQUEST FOR RECONSIDERATION**

This communication is in response to the Restriction Requirement mailed on March 28, 2007. Please amend the application as follows: